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Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. 7590 11/17/2005 SUGHRUE, MION, ZINN, MACPEAK & SEAS, PLLC Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. 2100 Pennsylvania Avenue N.W. Washington, DC 20037-3202 02/14/2006 MBEYENEZ 00000089 10612968 (Depositor's name) 1400.00 OP 01 FC:1501 300.00 OP (Signature) 02 FC:1504 (Date APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 4709 10/612,968 07/07/2003 Takao Miyazaki O76146 TITLE OF INVENTION: GOODS-WRAPPING APPARATUS INCLUDING A PRINTER **ISSUE FEE** PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE APPLN, TYPE SMALL ENTITY \$300 \$1700 02/17/2006 nonprovisional NO \$1400 **EXAMINER** ART UNIT CLASS-SUBCLASS CHAU, MINH H 2854 101-035000 1. Change of correspondence address or indication of "Fee Address" (37 2. For printing on the patent front page, list CFR 1.363). (1) the names of up to 3 registered patent attorneys ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. SUGHRUE MION, PLLC "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Kanagawa, Japan Fuji Photo Film Co., Ltd. Individual Corporation or other private group entity Government Please check the appropriate assignee category or categories (will not be printed on the patent): 4b. Payment of Fee(s): 4a. The following fee(s) are enclosed: Lesue Fee A check is attached for the NOA Fees payment. Please Publication Fee (No small entity discount permitted) charge any payment deficiency and credit overpayment to Advance Order - # of Copies r credit any overpayment, to copy of this form). PODA 19-4880. A duplicate copy of this form is attached. 5. 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